CLAIM AMENDMENTS

1. (Previously Presented) A method of preparing a sustained release formulation of a peptide or peptidomimetic, which comprises associating the peptide or peptidomimetic with a counter-ion of a strong proton donor in an amount and at a molar ratio that are sufficient to provide a fluid, milky microcrystalline aqueous suspension of the peptide or peptidomimetic without formation of a gel, such that, when administered to a subject, the peptide is released in vivo over a period of at least two weeks.

2. (Previously Presented) The method of claim 1 wherein the counter-ion is a trifluoro methanesulfonic acid, benzenesulfonic acid, trifluoroacetic acid or sulfuric acid.

3. (Previously Presented) The method of claim 1 in which the counter-ion is a strong acid and the peptide is a GnRH analogue.

4. (Previously Presented) The method of claim 3 in which the GnRH analogue is a GnRH antagonist.

5. (Previously Presented) The method of claim 4 in which the GnRH antagonist is Ac—D—Nal—DCpa—D—Pal—Ser—Tyr—D—Hci—Leu—Ilys—Pro—D—Ala—NH_2.

6. (Previously Presented) The method of claim 4 in which the GnRH antagonist is Azaline B, Abarelix, Antide, Ganirelix, Cetrorelix, or FE200486 and is in the form of a alkylsulfonate, arylsulfonate, trifluoroacetate or sulfate salt.

7. (Previously Presented) The method of claim 1 in which the peptide is a somatostatin analogue.

8. (Previously Presented) The method of claim 1 in which the somatostatin analogue is Vapreotide, Octreotide, Lanreotide, or SOM 230.

9. (Previously Presented) The method of claim 1 wherein the peptide or peptidomimetic forms a salt with the counter-ion, and the salt is suspended in the aqueous

medium at a concentration of at least 25 mg/ml.

10. (Previously Presented) The method of claim 9 in which the aqueous suspension is injected parenterally into a mammal or human subject to obtain a sustained release of the peptide or peptidomimetic over at least one month.

11. (Previously Presented) The method of claim 9 in which the amount of peptide or peptidomimetic in the suspension to be injected ranges from about 0.1 to 5 mg per kg body weight of the mammal or human subject.

12. (Previously Presented) A fluid, milky microcrystalline aqueous suspension of a peptide or peptidomimetic and a counter-ion of a strong proton donor in water, wherein the peptide or peptidomimetic and counter-ion are present in amounts and at a molar ratio sufficient to form the suspension of the peptide or peptidomimetic upon mixing without formation of a gel.

13. (Previously Presented) The suspension of claim 12 wherein the counter-ion is trifluoro methanesulfonic acid, benzenesulfonic acid, trifluoroacetic acid, or sulfuric acid.

14. (Previously Presented) The suspension of claim 12 in which the counter-ion is a strong acid and the peptide is a GnRH analogue.

15. (Previously Presented) The suspension of claim 14 in which the GnRH analogue is a GnRH antagonist.

16. (Previously Presented) The suspension of claim 14 in which the GnRH antagonist is Ac—D—Nal—D—Cpa—D—Pal—Ser—Tyr—D—Hci—Leu—Ilys—Pro—D—Ala—NH_2.

17. (Previously Presented) The suspension of claim 14 in which the GnRH antagonist is Azaline B, Abarelix, Antide, Ganirelix, Cetrorelix, or FE200486 and is in the form of a alkylsulfonate, arylsulfonate, trifluoroacetate or sulfate salt.

18. (Previously Presented) The suspension of claim 12 in which the peptide is a somatostatin analogue.

19. (Previously Presented) The suspension of claim 18 in which the somatostatin analogue is Vapreotide, Octreotide, Lanreotide or SOM 230.

20. (Previously Presented) The suspension of claim 12 wherein the peptide or peptidomimetic forms a salt with the counter-ion, and the salt is suspended in the aqueous medium at a concentration of equal to or higher than 25 mg/ml.

21. (Previously Presented) The suspension of claim 12 in which the aqueous suspension contains an isotonic agent.

22. (Previously Presented) The suspension of claim 21 in which the isotonic agent is mannitol.

23. (Previously Presented) The suspension of claim 12 which further comprises a pharmaceutically acceptable excipient.

24. (Previously Presented) The suspension of claim 23 in which the amount of peptide or peptidomimetic ranges from about 0.1 to 5 mg per kg body weight of a mammal or human to which the suspension is to be administered.

25. (Previously Presented) The suspension of claim 12 wherein in the form of microcrystals having a particle size of between about 1 and 150 μm.

26. (Previously Presented) A lyophilized composition comprising the dried suspension of claim 12.

27. (Currently Amended) A method of making the lyophilized composition of claim 26~~claim 25~~ which comprises associating the peptide or peptidomimetic with a counter-ion of a strong proton donor in an amount and at a molar ratio that are sufficient to provide the suspension without formation of a gel, and lyophilizing the suspension to obtain the composition.

28. (Currently Amended) A method of preparing a fluid, milky microcrystalline aqueous suspension of a peptide or peptidomimetic which comprises adding water or a buffer solution to the lyophilized composition of claim 26~~claim 25~~ with mixing to obtain the suspension.

29. (Previously Presented) A method of preparing a fluid, milky microcrystalline aqueous suspension of a peptide or peptidomimetic which comprises associating the peptide or peptidomimetic with a counter-ion of a strong proton donor in an amount and at a molar ratio with the peptide that are sufficient to provide a fluid, milky microcrystalline aqueous suspension of the peptide or peptidomimetic without formation of a gel; lyophilizing the suspension to form a lyophilized composition; and adding water or a buffer solution to the lyophilized composition with mixing to obtain the suspension.

30. (New) Ac—D—Nal—D—pClPhe—D—Pal—Ser—Tyr—D—Hci—Leu—Lys(iPr)—Pro—D—Ala—NH_2 trifluoroacetate.

31. (New) Ac—D—Nal—D—pClPhe—D—Pal—Ser—Tyr—D—Hci—Leu—Lys(iPr)—Pro—D—Ala—NH_2 sulfate.